

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail Box ISSUE FEE**  
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**CONCURRENT CORRESPONDENCE ADDRESS (None: Legibly hand-up with any corrections of this block 1)**

7590

06/19/2002

Ivor R. Elrifi  
 Mintz Levin Cohn Ferris Glovsky & Popeo PC  
 One Financial Center  
 Boston, MA 02101

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

(Depositor's name)

(Signature)

(Date)

APPLICATION NO. 08/486,313	ISSUING DATE 06/07/1995	FIRST NAMED INVENTOR SAMUEL WEISS	ATTORNEY DOCKET NO. A-61105-11/D	CONFIRMATION NO. 6538
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**TITLE OF INVENTION:** NEURAL TRANSPLANTATION USING PROLIFERATED MULTIPOTENT NEURAL STEM CELLS AND THEIR PROGENY

APPLN. TYPE nonprovisional	SMALL ENTITY YES	ISSUE FEE \$640	PUBLICATION FEE \$0	TOTAL FEE(S) DUE \$640	DATE DUE 09/19/2002
EXAMINER BAKER, ANNE MARIE		ART UNIT 1632	CLASS-SUBCLASS 424-093100		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Mintz, Levin, Cohn, Ferris,  
 Glövsky and Popeo, P.C.  
 Ivor R. Elrifi, Esq.  
 Christina V. Karnakis, Esq.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

NeuroSpheres Holdings Ltd.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Calgary, Alberta, CANADA

Please check the appropriate assignee category or categories (will not be printed on the patent)

☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee

☐ Publication Fee

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(Authorized Signature)

*Christina V. Karnakis*

(Date)

July 2, 2002

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